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APPLICANTS

Darrel J. Van Buer, Los Angeles, CA;
 Richard A. Johnson, Rochester Hills, MI;
 Son K. Dao, Northridge, CA;
 Andrea Marie Simon, Walled Lake, MI;

** CONTINUING DATA ****

** FOREIGN APPLICATIONS ****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 4	TOTAL CLAIMS 22	INDEPENDENT CLAIMS 34
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature <i>CKM</i>	Initials <i>CKM</i>			

ADDRESS

KATHRYN A MARRA
 General Motors Corporation
 Legal Staff, Mail Code 482-C23-B21
 P.O. Box 300
 Detroit, MI48265-3000

TITLE

Prediction of vehicle operator destinations

FILING FEE RECEIVED 1056	FEES: Authority has been given in Paper. No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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